



Waiver Wise

Technical Assistance for the Community Options Program Waiver COP-W

Wisconsin Department of Health & Family Services • Division of Supportive Living
Bureau of Aging & Long Term Care Resources

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What should be entered on HSRS under Standard Program Category (SPC) 095.01 – Cost Share and 095.02 – Refunds/Voluntary Contributions?

Background

The Human Service Reporting System (HSRS) is used by county agencies to enter data on social service and mental health participants, the services they receive, and the funds expended for those services. In turn, the Bureau of Aging and Long Term Care Resources (BALTCR) uses the information reported on HSRS to provide the federal government with required information and to develop profiles of waiver participants and service utilization for state officials.

Standard Program Category (SPC) codes were developed to facilitate the accurate recording of service and spending information on HSRS. Two of the codes developed, SPC 095.01 and SPC 095.02, were specifically created to record information about cost share obligations, refunds, and voluntary contributions. Unlike other SPCs, these codes represent negative numbers (revenue) and subsequently reduce total expenditures reported.

Participant Cost Share – SPC 095.01

Previously, when a program participant had a cost share obligation, he/she either sent the payment directly to a service provider to offset the total cost of services the provider would bill the county, or he/she sent that payment directly to the agency administering the waiver program. In both instances, the county was responsible for ensuring the cost share payment was used to offset the total cost of waiver program services for the month the cost share obligation was due.

At times, these two processes were problematic for the county and for those people responsible for the waiver program's fiscal reporting. Payments received by the county were recorded as revenue. The same amount was recorded as a debit when applied to a service. The cost share amount had to be manually applied to the months the services were provided. Since cost share payments are frequently made in the month after the

payment is due, this caused difficulty in ensuring the cost share payments were correctly accounted for.

To facilitate accurate recording of the cost share payments, the 095.01 SPC code was created. By entering the amount of the monthly cost share payment for a participant on the HSRS system, the system automatically subtracts the amount of the cost share payment from the total amount the agency reports as service costs in the correct month for both.

Refunds and/or Voluntary Contributions – SPC 095.02

At times, the fiscal management of the waiver program involves:

- a. receiving revenue from other sources such as Medicare;
- b. refunding dollars to participants (a participant may be due a refund from an amount over paid for a cost share obligation);
- c. recording voluntary contributions (a participant may choose to freely contribute to the cost of their waiver services).

To facilitate the recording of this revenue, SPC Code 095.02 was created. SPC Code 095.02 serves a similar function as SPC Code 095.01 in that payments are subtracted from the participant's total service costs on HSRS.

Example: Substitute Care

Voluntary contributions most frequently occur when a participant lives in a substitute care setting. For example, a CBRF has room/board costs of \$400/month. A participant/guardian may choose to make an additional payment from their income (\$685) towards the cost of CBRF care/supervision services. The participant/guardian retains \$5/month for medical/remedial expenses, in addition to the \$65 personal spending allowance. The participant then has \$215/month of additional discretionary income. Because the participant cannot have more than \$2,000 in assets, and all funeral/burial expenses have been prepaid, and the participant has no other unmet needs or desires, the participant/guardian may choose to make a voluntary contribution of \$215/month to offset the total cost of care/supervision costs usually paid by the waiver program.

Example: Spenddowns

Another example of a voluntary contribution is Group C spenddown payments. Group C participants have a spenddown obligation that is required to be incurred on a monthly basis in order to maintain eligibility. In some cases, the Group C participant is required to pay out his/her spenddown amount. In those cases, the participant first pays his/her out-of-pocket medically related expenses, (if applicable) COP expenses (excluding room and board costs), then waiver-related expenses, and lastly (if applicable) Medicaid card expenses. As with the cost share, spenddown payments can be made directly to the vendor of services or to the county. Now when the spenddown payments are made to the county, they are considered a voluntary contribution and are entered on HSRS using the 095.02 SPC code.

Example: Refunds

The county may purchase a lift chair for a participant only to find out that it was approved for reimbursement by Medicare. The participant reimburses the county agency. Because the expenditure had been reported in the prior calendar year and an adjustment cannot be made on the bill paid, a refund is reported on HSRS for the participant under SPC 095.02.

Please note: Revenue from Medical Assistance Personal Care would not be recorded on HSRS because this revenue should not be occurring. All providers of Medicaid card services must accept state Medicaid reimbursement as “payment in full”. No additional amount (supplementation) can be billed to the waiver for the same hours that are billed to the Medicaid card.